

The Indiana Commission to Combat Drug Abuse



Behavioral Health Division

2023 Comprehensive Community Plan

County: LaPorte

LCC Name: LaPorte County Drug Free Partnership

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City: LaPorte

Zip Code: 46350

Vision Statement

What is your Local Coordinating Council's vision statement?

In effort to create a healthy and drug free La Porte County our vision is to create a multi-sector community infrastructure to reduce recidivism and address access to mental health and/or substance use services by proactive engagement of community stakeholders inclusive of youth and those with a lived experience or in recovery.

Mission Statement

What is your Local Coordinating Council's mission statement?

To bring together individuals, organizations, and agencies both public and private, who seek to provide optimal resources for the combating of Alcohol, Tobacco, and Other Drug abuse in LaPorte County, which includes specific focus on binge drinking, prescription drug abuse, marijuana usage, and youth prevention efforts.

	Membership List				
	Name	Organization	Race	Gender	Category
1	Emily Back	LP Courts	Caucasian	Female	Prevention
2	Deborah Briggs	Open Door Health Center	Caucasian	Female	Prevention
3	Dr Tammy Bunton	Dunebrook	Caucasian	Female	Prevention
4	Steve Butera	HealthLinc FQHC	Caucasian	Male	Treatment
5	Pat Cicero	LaPorte County Sheriff's Office	Caucasian	Male	Law Enforcement
6	Marisa Chaples	United Way	Hispanic	Female	Prevention
7	Yvonne Clancy	HealthLinc	Caucasian	Female	Prevention
8	Marty Corley	Michigan City Police Dept	African American	Male	Law Enforcement
9	Greg Coulter	Healthy Communities Tobacco Coalition	Caucasian	Male	Prevention
10	Heidi Darrah	Franciscan Hospital	Caucasian	Female	Treatment
11	Sheryl Decker	Michiana Behavioral	Caucasian	Female	Treatment
12	Bill Degnegaard	LaPorte Police Department	Caucasian	Male	Law Enforcement
13	Angie Nelson Deutch	Diversity-Squared Consulting/MC City Government	African American	Female	Prevention/Government
14	Dr. Chris Drapeau	988- Vibrant.org	Caucasian	Male	Treatment
15	Hannah Dybalski	HealthLinc	Caucasian	Female	Prevention/Treatment
16	Joan Ganschow	Life Changes, LLC/ Minority Health Partners of LaPorte County	Caucasian	Female	Judiciary/Treatment
17	Ronda Gorby	Footprints to Recovry	Caucasian	Female	Treatment
18	L. Allen Grecula	North Shore	Caucasian	Male	Treatment
19	Pam Henderson	Dunebrook	Caucasian	Female	Prevention
20	Donna Golub	Positive Approach/Path	Caucasian	Female	Prevention
21	Jackie Heemstra	Meridian Health Services	Caucasian	Female	Treatment
22	Katie Jasnieski	Swanson Center	Caucasian	Female	Treatment
23	Ann Klute-Rissman	La Porte County Board of Health	Caucasian	Female	Prevention
24	Margaret Land	Michiana Behavioral Health	Caucasian	Female	Treatment

25	James Lear	LaPorte County Sherriff's Office	Caucasian	Male	Law Enforcement
26	Mary Clare Bergerson-Lehker	Youth Services Bureau	Caucasian	Female	Prevention
27	Ephphatha Malden	Health Linc	African American	Female	Treatment
28	Randy Novak	County Commissioner	Caucasian	Female	Government
29	Christine Micheals-Paul	Artistic recovery	Caucasian	Female	Recovery Treatment
30	Toni Osowski	LaPorte Teen Court	Caucasian	Female	Youth Prevention Judiciary
31	Dan Peck	CEO Swanson Center CMHC	Caucasian	Male	Treatment
32	* Lisa Pierzakowski	Center Township Trustee	Caucasian	Female	Prevention/Government
33	Emily Powell	RCA- Recovery Center of America	Caucasian	Female	Treatment
34	Nathan Rivers	Allendale Treatment	Caucasian	Male	Treatment
35	Christine Rosenbaum	La Porte Community Schools	Caucasian	Female	Prevention
36	Stephanie Shostok	Alkermes/Vivitrol	Caucasian	Female	Treatment
37	Larry Smith	The Intrepid Phoenix	Caucasian	Male	Treatment
38	Andy Snyder	City of LaPorte Fire Dept	Caucasian	Male	Government
39	Ameenah Starks	Bowen Center	African American	Female	Treatment
40	Lynn Swanson	Laporte County Coroner	Caucasian	Female	Government
41	Heather Taylor	Dunebrook	Caucasian	Female	Prevention
42	Tyra Walker	Sheriff's Department/ IUN	African American	Female	Treatment
43	Micki Webb	Coalition Coordination	Caucasian	Female	Prevention/ Treatment
44	Megan Wichlinski	Franciscan Hospital	Caucasian	Female	Treatment
45	Sunny Williams	TechServ	Asian	Female	Prevention and Treatment
46	Blake Wood	TechServ	Caucasian	Male	Prevention and Treatment
47	Hangie Zamora	Franciscan Hospital Behavioral Unit	Hispanic/Caucasian	Female	Treatment
48	Ashley Ortega-Zeh	LaPorte Superior Court/Problem Solving Court	Hispanic/ Caucasian	Female	Justice

LCC Meeting Schedule:

Please provide the months the LCC meets throughout the year: The first Wednesday of each month at 8:00 a.m. CST in February, March, April, May, June, August, September, October, November, December. The coalition does not meet in January or July.

The **2023 General Meetings** are scheduled for Feb 1, Mar 1, Apr 5, May 3 June 7, Aug 2, Sept 6th, Oct 4th Nov 1, Dec 6th

The Overdose/Suicide Fatality Review Subcommittee (closed) Meetings are scheduled the **3rd Tuesday** of each month at 8:00 a.m. CST on Jan 17, Feb 21, March 21, April 18 May 16, June 20, July 18, Aug 15, Sept. 19, Oct 17, Nov 21 and Dec 19.

The Crisis Intervention Team Subcommittee Meetings are scheduled the **1st Wednesday** of each month immediately following the General meeting at 9:00 a.m. CST Feb 1, Mar 1, Apr 5, May 3 June 7, Aug 2, Sept 6, Oct 4 Nov 1, Dec 6th

Currently the LPCLCC Meetings are held at the NIEF Building at 402 Franklin Street, Michigan City, Indiana 46360 with the capacity to attend hybrid via ZOOM

II. Community Needs Assessment

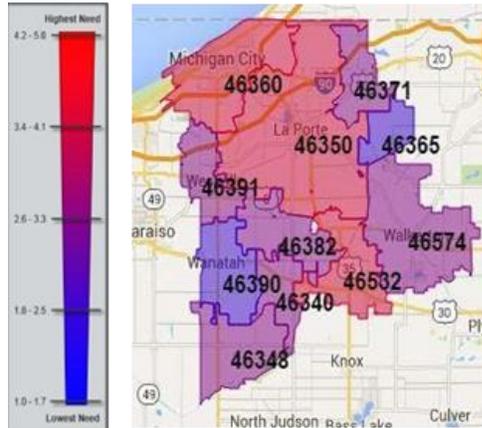
The first step in developing an effective substance use and misuse reduction plan is to assess your community. A community assessment tells you about your community's readiness to implement prevention, treatment, and justice-related programs to address substance use and misuse. An assessment also provides an overview of the risk and protective factors present in the community, helping your coalition plan more effectively.

Community Profile

County Name LaPorte County Indiana

County- The LCC serves the 598.3 square mile area of LaPorte County Indiana which reflects the unique challenges of both urban and rural communities. Population Census data (hoosierdata.in.gov/profiles) indicates 111,675 residents. The median household income is \$62,620 in 2021 and the Poverty rate is 12.2% as compared to 12.1% of the state. The poverty rate among children is 18.7%. The current Living Wage Calculator as calculated by the Massachusetts Institute of Technology (MIT) for LaPorte County is \$40.51 per hour for one adult and two children in a household working 2080 hours per year to meet basic needs. Only 19.7% of adults 25 years or older have a Bachelor's degree or higher as compared to 27.8% in the state and 10.65% have not acquired a high school diploma or GED. The racial and ethnic makeup of the county is 84.5% White, 11.7% African American alone, and 7.3% Hispanic or Latino, 2.7% Two or more races, 0.7% Asian alone and 0.5% American Indian or Alaska Native. Nearly half

of the residents live in the ethnically diverse, cities of Michigan City (28.7%) and the City of LaPorte (20.0%). The county is served by 6 public school corporations with a 2021/22 enrollment of 16,077



students, Data reflect 8899 students 55.4% or are on Free or Reduced lunch. Critical community needs in the geographic zip code areas of 46360 and 46350 is demonstrated based on national indicators in the community Needs Index from Dignity Health. The Community Needs Index, is a planning tool that denotes the health and structural indicators and severity of health disparities and access to needed resources. Qualitative reports from local listening sessions indicate organizational staffing concerns and that the shortage of local providers can result in waiting weeks and even months for an appointment for mental health and addiction services. Transportation, costs, work schedules, lack of health care coverage, high deductibles, and a limited number of

providers willing to accept Medicaid reimbursement, lack of inpatient addiction services in the county, and lack of youth inpatient services further exacerbates the problem of access to quality evidence based mental health and substance use healthcare interventions. A gap analysis for LaPorte County, Indiana on the Healthcare Foundation's website revealed information from the Robert Wood Johnson Foundation's County Health Ranking report (2022) that revealed the county ranks 72 out of 92 counties in health outcomes, and 83 of 92 counties in Health Factors. Compounding the issue of mental health substance access is a significant shortage in La Porte County of other community mental health providers that is evident in the county ratio of 910:1 as compared to the state ratio of 530:1 and the US ratio of 340:1. This is significant because "psychological distress can affect all aspect of our lives and delays in treatment can lead to increased morbidity and mortality including the development of various psychiatric and physical co-morbidities. In addition, it can lead to life threatening and life altering self-treatments (e.g. illicit and illicit substance use)" (2021 RWJ County Health Ranking Report) as well as increase incidence of crime in a community. This information further corroborated by data from the LaPorte County Coroner that reflects increases in overdose deaths from 50 in 2022, and 22 deaths by suicide in 2022 however these numbers are considered underreported as all deaths were not autopsied to determine cause of death. Law enforcement data for 2021 indicates a total of 431 mental health calls as compared to 344 mental health calls in 2021 and 422 law enforcement responses to suicide threats/attempts in 2022 as compared to 395 suicide threats/attempts in 2021.

Schools in the community- per most current IDOE enrollment data

Michigan City Area Schools Enrollment:5193; (Michigan City High School, Barker Middle School, Krueger Middle Schools, Coolspring, Edgewood, Joy, Knapp, Lake Hills, Marsh, Pine, Springfield)

76.8% economically disadvantaged/F/R Lunch

LaPorte Community Schools, Enrollment: 6227 (LaPorte High School, LaPorte Middle School, Kesling Intermediate, Critchfield Elementary, Hailmann Elementary, Handley Elementary, Indian Trail Elementary, Kingsbury Elementary, Kingsford Heights, Lincoln Elementary, Riley Elementary)

58.1% economically disadvantaged/F/R Lunch

New Prairie United School Corporation Enrollment: 2910 New Prairie High School, New Prairie Middle School, Olive Elementary, Prairie View Elementary, Rolling Prairie Elementary) **39.0% economically disadvantaged/F/R Lunch**

MSD of New Durham Township Enrollment: 944 Westville Elementary PK-06, Westville HS 07-12, **37.8% economically disadvantaged/F/R Lunch**

South Central Community School Corporation Enrollment: 950 So. Central Elementary PK-6, So Central Jr-Senior HS 07-12, **35.2% economically disadvantaged F/R Lunch**

Tri-Township Consolidated School Corporation Enrollment: 337; Wanatah PK-08, La Crosse 9-12, **45.1% economically disadvantaged/F/R Lunch**

<p>Medical care providers in the community (hospitals, health care centers, medical centers/clinics, etc.) Franciscan Hospital-Michigan City Northwest formerly IU Health/formerly LaPorte Hospital- LaPorte Franciscan Physician Network Health Partners – Michigan City HealthLinc (FQHC) Open Door Adolescent Health Clinic @ Michigan City High School</p>
<p>Mental health care providers in the community (hospitals with psychiatric/behavioral health units, mental health clinics, private/public providers, etc.) Inpatient Franciscan Hospital (offers a behavioral health unit for adults.) Outpatient services include: Swanson Center Community Mental Health Center, Other mental health providers include: Northshore Health, (formerly Frontline), Meridian Health Services (school, community home-based and telehealth services for children and adults), Bowen Center, (community based services), Samaritan Counseling Center (outpatient).</p>
<p>Service agencies/organizations Stepping Stone & The Bridge Domestic Violence Shelter Sandcastle Shelter for (Homeless)Families Keys to Hope Community Resource Center (Michigan City) Housing Opportunities Pax Center (LaPorte) Minority Health Partners of LaPorte County CASA/CAYA Court Appointed Youth Advocates Safe Harbor After School program Michigan City Area Schools Boys & Girls Club of Michigan City Commission for the Social Status of African American Males Healthy Communities Interfaith Community PADS Unity Foundation Duneland Health Foundation Healthcare Foundation of LaPorte LaPorte County Home Team LaPorte County System of Care through United Way</p>
<p>Local media outlets that reach the community WIMS, WEFM, WLOE Local Radio ALCO Local Cable channel LP News Dispatch</p>
<p>What are the substances that are most problematic in your community? Opiates- Fentanyl Heroin Alcohol Methamphetamines Marijuana and Synthetic Marijuana *Note the Overdose/Suicide Fatality Review Team reports significant incidence of Fentanyl present in most fatal overdoses</p>
<p>List all substance use/misuse services/activities/programs presently taking place in the community LaPorte County Drug Free Partnership/Health Linc Collaboration- TI-ROSC-</p> <ul style="list-style-type: none"> • Trauma Informed Recovery Oriented System of Care, • Overdose/Suicide Fatality Review Team, • Crisis Intervention Team • Behavioral Health Task Force

- Mobile Integrated Response Team- MIRT

Dunebrook- Nurturing Parenting Program

Northshore Health Addiction Treatment Center formerly Frontline

Swanson Center Community Mental Health Center

Health Linc- FQHC- Health and Behavioral Health- MIRT-Mobile Integrated Response Team & Peer Recovery Coaches

Open Door Adolescent Health Clinic- School based mental health and substance use services at Michigan City High School

Meridian Health Services- mental health and substance use counseling individual and family including co-occurring disorders

The Artistic Recovery- recovery oriented community center

Samaritan Counseling Center- Outpatient services, Co-occurring disorders, limited fee subsidies

Intrepid Phoenix- Recovery-focused Physical Fitness

Youth Service Bureau- Teen Court Ripple Effects

Healthcare Foundation of LaPorte Partners in Prevention- School based curriculum supported in 11 (public & private) school corporations that includes Botvin, Life Skills, Second Step

Worthy Women Recovery Home

Dunes Fellowship House- Alcohol program

YANA Club- AA Support

Community Risk and Protective Factors

Use the list of risk and protective factors to identify those present in your community. Identify the resources/assets and limitations/gaps that exist in your community related to each. The lists are not all-inclusive and others may apply.

Risk Factors Examples: trauma and toxic stressors; poverty violence; neighborhood characteristics; low neighborhood attachment; community disorganization; community norms and laws favorable toward drug use, firearms, and crime; availability of alcohol and other drugs; weak family relationships; family substance use; peer substance use; mental health problems; families moving frequently from home to home; limited prevention and recovery resources.

Protective Factors Examples: strong family relationships; neighborhood economic viability; low childhood stress; access to health care; access to mental health care; community-based interventions; restricted access to alcohol and other drugs including restrictive laws and excise taxes; safe, supportive, and connected neighborhoods; meaningful youth engagement opportunities; local policies and practices that support healthy norms and child-youth programs; positive connection to adults.¹

Risk Factors	Resources/Assets	Limitations/Gaps
1. Access to mental health and substance use treatment is limited or non-existent	Frontline Foundation now dba as North Shore launched a Quick Response Team in 2018 for	1. Mental Health and Substance Abuse Provider Shortage According to the County Needs Index LaPorte County has a

¹Risk and protective factors extracted from IUPUI Center for Health Policy Community Conditions Favorable for Substance Use, April 2018.

<p>particularly for uninsured or underinsured</p>	<p>outreach comprised of police, fire and recovery coaches. In collaboration with HealthLine and the LCC a Mobile Response Team moved from part time to full time and include a Law Enforcement & Peer Recovery coaches are now in place in the Emergency Rooms of the two hospitals.</p> <p>LaPorte leads all regional counties in both referrals and intakes in the MIRT program. Approximately 600-700 students access the Open Door Adolescent Health Clinic at Michigan City High School. The clinic offers screening assessment treatment and referral of students who are enrolled at Michigan City High School using the AUDIT, DAST 10, GAD 7 and PHQ-Adolescent and treat via Motivational Enhancement Therapy and Cognitive Behavior Therapy.</p> <p>The Open Door completes 400-500 risk screenings annual of which intervention and substance use treatment is provided to approximately 30% receive intervention treatment.</p> <p>Slicer Support Clinic offers free mental health services to registered students at LaPorte High School.</p>	<p>mental health provider ratio of 1:1910 as compared to the ratio of 1:530 in the state and US ratio of 1:340 (Robert Wood Johnson County Health Rankings 2022)</p> <p>2.Second worst quartile nationally</p> <p>3. There are no inpatient substance use treatment facilities in the county.</p> <p>4. 5.72% of the population speak a language other than English and the County has a growing Latino population in 2021 data. (2022 language data unavailable.</p> <p>5. MIT Living wage calculator reports a single parent with 2 children must earn \$40.51 per hour for basic needs, thus necessitating multiple jobs and impacting the protective factor of parental availability</p>
<p>2. Availability of illegal substances exacerbated by Law Enforcement Staffing shortages- 26 vacancies in the county</p>	<p>1.LaPorte County Drug Task Force is a multiagency unit part of a HIDTA initiative and includes Michigan City and LaPorte PD, County Sheriff's office and ATF</p>	<p>1.HIDTA- County is located on a main drug trafficking corridor.</p> <p>2. Law enforcement jurisdictions report the following significant staffing shortages totaling 26 vacancies in LaPorte County which thus impacts availability and enforcement over nearly 600 sq miles Michigan City PD 70 sworn/ 14 vacancies</p>

		<p>LaPorte County Sherriff 63 sworn/5 vacancies</p> <p>City of LaPorte PD 42 sworn/ 2 vacancies.</p> <p>Long Beach Marshal 5 sworn/1 vacancy</p> <p>Trail Creek Marshal 3 sworn/1 vacancy</p> <p>Westville Marshal 3 sworn/1 vacancy</p> <p>Kingsford Heights Marshal 1 sworn/2 vacancies</p> <p>3. Coroner reports increases in prevalence of fentanyl</p> <p>4. Living wage calculator for 2022 indicates a resident with 2 children needs to earn \$40.51 per hour for 2080 hours to meet basic needs often necessitating multiple jobs, limiting the protective factor of parental supervision and/or reportedly turning a blind eye to the sale of illicit substances in order to provide for household.</p> <p>5 County borders the state of Michigan where marijuana is legal and about 1 hour from the Illinois border and community norms promote acceptance of marijuana usage.</p>
<p>Attitudes toward use</p>	<p>1.The LPCLCC has collaborated with Health Linc in facilitation of a Mobile Integrated Response Team that includes law enforcement, hospitals, health and treatment providers and peer recovery coaches.</p> <p>2. Initial MIRT outcomes indicate those that 78% who completed 6 months remained abstinent and participation in self- help groups increased from 45% to 88%</p> <p>2. Coalition collaborated with Overdose Lifeline and sponsored Harm Reduction Naloxone</p>	<p>1.72/92 counties in health outcomes and 83/92 counties in Health Factors (RWJF County Health Rankings)</p> <p>2. Parents may turn a blind eye to youth alcohol and substance use and consider it a rite of passage. Because of the geographic size of the county and law enforcement staffing shortages the enforcement capacity is limited.</p> <p>3. Community norms minimize the risk of marijuana use with perception it is harmless or will eventually be legal.</p>

	<p>Training for Membership and distributed 2 cases of Naloxone</p> <p>3. Trauma Informed Recovery Oriented System of Care (TI-ROSC)- LCC has collaborated with Health Linc, Health Department, Law Enforcement, Coroner, and Treatment providers to train and implement the TI-ROSC model</p>	
Protective Factors	Resources/Assets	Limitations/Gaps
<p>1. Meaningful K-12 youth engagement activities</p>	<p>1. Free or low cost Affordable before and after-school activities and care in Michigan City Area Schools via Safe Harbor and Boys & Girls Club</p> <p>2. Schools are incorporating Evidence based prevention programs via Health Care Foundation Funding</p>	<p>1. Middle School and High School Safe Harbor program is free, and include food and activity bus transportation however a limited number in this age range participate.</p> <p>2. Limited staffing resources and educator time for implementation.</p>
<p>2. Unified law enforcement efforts</p>	<p>1. LaPorte County Drug Task Force- Multi-jurisdictional Drug Task Force is part of a HIDTA task force</p> <p>2. Law Enforcement is actively engaged in the Overdose/Suicide Fatality Review Team</p> <p>3. Law Enforcement is actively engaged in the Crisis Intervention Team with a Law Enforcement Officer certified as the Law Enforcement CIT Coordinator. A total of 47 Law Enforcement Officers and First Responders were certified in the 40 hour Crisis Intervention Team training to improve responses to mental health and substance use crises with specialized substance use training incorporated into the training curriculum.</p> <p>4. The 5 law enforcement jurisdictions have signed MOUs to collaborate and have a contingent of officer's trained</p>	<p>1. Limited staffing and financial resources.</p> <p>2. Geographic location as a HIDTA major drug corridor coupled with law enforcement staffing shortages and proximity to Chicago has brought a flood of illicit substances particularly heroin fentanyl and methamphetamine and illegal weapons into the county</p>

	and certified in CIT as part of a countywide CIT team and thus to improve response to substance use and mental health	
3. Court Diversionary Programs	<ol style="list-style-type: none"> 1. LaPorte County Drug Court offers an intervention approach in lieu of incarceration and strives to change attitudes toward 2. Teen Court serves entry level offenders who may be at risk of use via the evidence -based Ripple Effect program 	<ol style="list-style-type: none"> 1. Diversionary programs have resulted in continued decreases in fees collected by the courts to support other local LCC efforts. 2. Limited financial resources

III. Making A Community Action Plan

Now that you have completed a community assessment and have identified the risk and protective factors that exist, you can develop a plan of action. The Comprehensive Community Plan (CCP) is a systematic and community-driven gathering, analysis, and reporting of community-level indicators for the purpose of identifying and addressing local substance use problems.

Step 1: Create problem statements, and ensure problems statements are in line with statutory requirements

Step 2: Ensure your problem statements are evidence-informed, then prioritize

Step 3: Brainstorm what can be done about each

Step 4: Prioritize your list, and develop SMART goal statements for each

Step 5: List the steps to achieve each goal

Step 1: Create + Categorize Problem Statements

Create problem statements as they relate to each of the identified risk factors.

Risk Factors	Problem Statement(s)
1. Illicit drugs and alcohol are readily available	<ol style="list-style-type: none"> 1. La Porte County is located on a HIDTA corridor. 2. 2021 LaPorte County arrest data in the Indiana MPH indicate 725 arrests or 28.7% 3. INSPECT 2021 data reflects 768.7 opioid prescriptions dispensed per 1000 population as compared to 642 the prior year according to the SEOW report

	<p>4. Of the 433 Treatment episodes, 54 involved prescription opioid misuse, 35 Rx opioid dependence 215 for heroin misuse and 171 for heroin dependence according to the Treatment Episode data set SEOW report.</p> <p>5. The multi-jurisdictional County Drug Task Force reports an influx of illegal substances and guns entering the county specifically heroin, opiates, fentanyl and methamphetamine</p> <p>6. LaPorte County has 253 alcohol outlets or 23 per 10,000 of the population as compared to 18.2 per 10,000 in the state (IPRC)</p> <p>7. Alcohol outlet non-compliance was 6.0% in LaPorte County as compared to 5.5% in the state</p> <p>8 Fatality analysis of 4 of the 16 Total collisions were Alcohol related involved driving deaths was 25%</p> <p>9 46.2% of treatment admissions with alcohol use was reported and and 38.1% were for Alcohol Dependence/</p> <p>10. Marijuana use was reported in 27.5% of treatment episodes, and Marijuana dependence in 7.4%</p>
<p>2. Access to prevention and treatment is limited.</p>	<ol style="list-style-type: none"> 1. LaPorte County has no inpatient treatment. 2. LaPorte County has a shortage of outpatient mental health and substance use treatment providers with a ratio of 910:1 versus the state average of 530:1, and US average of 340:1. 3. LaPorte County ranks in the second worst quartile nationally with access to treatment. 4. LaPorte County has few or non-existent resources for the uninsured or underinsured
<p>3. Health Behaviors and Favorable Attitudes toward Use</p>	<ol style="list-style-type: none"> 1. LaPorte County ranks 72/92 counties in Health Outcomes according to the County Health Rankings Report. 2. Adjacent to Michigan and Illinois, adults and youth report favorable attitudes toward marijuana usage. 3. DCS Removal for parental alcohol or substance use 84.4 in LaPorte County as compared to 64.6 in Indiana (In Department of Children’s Services)

Step 2: Evidence-Informed Problem Statements

Identify your top three problem statements using local or state data. Ensure that there is a problem statement for each co-equal funding category (e.g., prevention/education; intervention/treatment; and criminal justice services and activities).

Problem Statements	Data That Establishes Problem	Data Source
<p>1. There is significant use of illegal substances particularly opiates, heroin/ fentanyl and Methamphetamine among youth and adults in LaPorte County</p>	<p>1. 2022 LaPorte County arrest data indicate 932 arrests or 12.5% for controlled substance, 429 arrests or 5.7% for Opioids and 486 arrests 6.5% for Methamphetamine, 2. Inspect data reflects 768.7 opioid prescriptions dispense per 1000 population as compared to state average 642 per 1000 in 2021 3. 433 treatment episodes involved prescription opioid misuse 12.5%, Rx Opioid dependence 8.1%, Heroin Use 29.6%, and Heroin Dependence 24.2% 4. Methamphetamine use was present in 21.7% and Methamphetamine dependence was present in 13.9% of treatment episodes 5. Law Enforcement and Drug Court Officials report observable increases in the prevalence of polydrug use that includes methamphetamine</p>	<p>1. Indiana MPH Law Enforce management hub 2022 data 2. In State Epidemiological Outcomes Workgroup Report on 2022 Inspect data 3. In. SEOW report 2022 4. SEOW report 2022 5. Listening sessions among law enforcement and drug court staff</p>
<p>2. Alcohol use is a problem for youth and adults in La Porte County.</p>	<p>Alcohol use was present in 46.2% and Alcohol Dependence was present in 38.1% of Treatment admissions Alcohol outlet density is 256 or 23.3 as compared to the state of 18.5. Alcohol non-compliance was 2.7% in LaPorte County for minimum age laws</p>	<p>IPRC County Epidemiological data Indiana State Excise Police SEOW report 2022 County Health Rankings Fatality Analysis Reporting system</p>

	Fatality analysis of Alcohol involved driving deaths was 25% as compared 4256 arrests in 2022 or 57% for Alcohol	Indiana MPH Law Enforce management hub 2022 data
3.Marijuana and Synthetic Marijuana Usage is a problem among youth and adults	Marijuana use is present in 27.5% and Marijuana Dependence was present in 7.4% of treatment admissions in LaPorte County	Indiana FSSA DMHA SFY 2022 and SEOW report Listening sessions among coalition membership and providers indicate it is an issue however is considered a misdemeanor offense. Of significant concern is the increase in vaping among youth and adults as well as the proximity to the adjacent state of Michigan where access to Marijuana vaping devices and edibles are easily accessible.

Step 3: Brainstorm

Consider the resources/assets and limitations/gaps that were identified for each risk factor, and list what actions can be taken for each identified problem statement.

Problem Statements	What can be done (action)?
1.The use of opioids heroin, fentanyl , and methamphetamine and other illicit substances is a problem in LaPorte County	1.Support and encourage services and treatment options for youth and adults 2. Support community and professional awareness education such as law enforcement, health care professionals, etc. 3. Support and encourage diversionary programs
2.The use of alcohol is a problem for youth and adults in LaPorte County	1. Support and encourage services and treatment options for youth and adults 2. Support community and professional awareness education and training. 3. Support and encourage diversionary programs

Step 4: Develop SMART Goal Statements

For each problem statement, prioritize your list of what can be done. Choose your **top two actions** for each. Then, develop goal statements that demonstrate what change you hope to achieve and by when you hope to achieve it.

Problem Statement #1 Opioids, Heroin, Fentanyl Methamphetamine and other illicit substances
Goal 1 By March 31, 2024 increase access by 10% to prevention, treatment and service options who may be uninsured or underinsured or otherwise not have access to treatment as indicated by service delivery numbers
Goal 2 By March 31, 2024 decrease the amount of prescription opioids dispensed by 10% from the INSPECT baseline of 768.7 per 1000. in LaPorte County
Goal 3 By March 31, 2024, reduce availability of illegal opioids, heroin, and methamphetamine in La Porte County as measured by a 10% annual increase in the amount of grams of narcotics seized by the La Porte County Law Enforcement.
Problem Statement #2 Alcohol
Goal 1 By March 31, 2024 increase access to prevention, treatment and service options who may be uninsured or underinsured or otherwise not have access to treatment.
Goal 2 By March 31, 2024, reduce the percent of driving deaths with alcohol involvement by 5% in comparison to a 25% baseline as reported in the County Health Rankings report.
Problem Statement #3 Marijuana and Synthetic Marijuana
Goal 1 By Mar 31, 2024, reduce access and availability of marijuana and synthetic marijuana in LaPorte County as measured by a 10% annual increase in the amount of grams of marijuana and synthetic seized by the LaPorte County law enforcement in comparison to 2021 law enforcement data
Goal 2 By March 31, 2024 decrease favorable perception of use among youth and adults as measured by a 5% decrease in reported 30 days use on the Indiana Youth Survey for Region 1 and/or a 5% decrease in positive drug screens administered by court officials.

Step 5: Plans to Achieve Goals

For each goal, list the steps required to achieve each

Problem Statement #1	Steps
Goal 1 By March 31, 2024 increase access by 10% to Substance Use prevention, treatment and service options who may be uninsured or underinsured or otherwise not have access to treatment as indicated by service delivery numbers.	<ol style="list-style-type: none"> 1.Support affordable treatment options and alternatives particularly for juveniles or for persons who are uninsured underinsured indigent/who may not access. 2. Support training and implementation programs to benefit clinical treatment efforts and a trauma informed recovery-oriented system of care. 3.Support prevention education efforts to impact youth and adults, with priority for evidence-based programs

	<p>4.Support leadership capacity building initiatives that support coalition member organizations.</p> <p>5 Support the continued development of a countywide Crisis Intervention Team and informational resources on referral processes.</p>
<p>Goal 2 By March 31, 2024 decrease the amount of prescription opioids dispensed by 10% from the INSPECT baseline in LaPorte County of 768.7 per 1000.</p>	<p>1.Support training activities for health care prescribers including a focus on educational awareness of LaPorte County dental practitioners.</p> <p>2. Support training activities for health care and behavioral healthcare professionals and peer recovery specialists on Evidence Based Programs, best practices harm reduction and pain management alternatives.</p> <p>3. Support monitoring efforts of Overdose Fatality Review Team to identify trends related to INSPECT and over prescribing practitioners.</p>
<p>Goal 3 By March 31, 2024, reduce availability of illegal opioids, heroin, and methamphetamine in La Porte County as measured by a 10% annual increase in the grams of narcotics seized by the La Porte County Law Enforcem3.Support affordable treatment options and alternatives particularly for juveniles or for persons who are uninsured underinsured indigent/who may not access.</p>	<p>1.Provide support for law enforcement and justice personnel via training, equipment, and supplies that support reduction efforts and provide linkages for access to services</p> <p>2. Provide support for drug testing and other monitoring and diversionary systems.</p>
<p>Problem Statement #2</p>	<p>Steps</p>
<p>Goal 1 By March 31, 2024 increase access to prevention, treatment and service options who may be uninsured or underinsured or otherwise not have access to treatment.</p>	<p>1. Support affordable treatment options and alternatives particularly for juveniles or for persons who are uninsured /underinsured indigent/who may not have access.</p> <p>2. Support strategies to build capacity for services and leadership/engagement among coalition members.</p> <p>3. Support Workforce Innovation efforts to fill the void in behavioral health providers which impacts access such as the training support of Peer Recovery Coaches and Peer Support Specialists.</p> <p>4.Support training and collaboration among coalition member organizations and the</p>

	<p>community on SUD and/or Co-Occurring Disorders and the impact of Trauma.</p> <p>5.Support training of CIT Officers and 1st Responders as part of the 40-hour CIT training in mechanisms and systems to refer and access services during crisis calls</p>
<p>Goal 2 By March 31, 2024, reduce the percent of driving deaths with alcohol involvement by 5% in comparison to a 25% baseline as reported in the County Health Rankings report.</p>	<p>1. Support alternative judicial and treatment pathways for offenders, such as problem-solving courts and juvenile diversionary options that address alcohol/ use abuse.</p> <p>2. Support leadership training / advocacy and activities to encourage peer-to-peer prevention, and positive substance-free lifestyle.</p>
Problem Statement #3	Steps
<p>Goal 1 By March 31, 2024 decrease favorable perception of use among youth and adults as measured by a 5% decrease in reported 30 day use on the Indiana Youth Survey and/or a 5% decrease in positive drug screens administered by probation or court officials</p>	<p>1.Support affordable treatment options and alternatives particularly for juveniles or for persons who are uninsured underinsured indigent/who may not access.</p> <p>2. Focus education efforts to enhance knowledge of the impact of marijuana & synthetic use of marijuana/synthetics and vaping including through media, facility, & community-oriented awareness.</p> <p>3. Promote awareness of marijuana & synthetic abuse issues in the workplace and encourage adoption of drug free workplace policies.</p> <p>4.Promote awareness of Tobacco Coalition concerns about marijuana vaping and engage Tobacco Coalition in overall coalition efforts.</p>
<p>Goal 2 By Mar 31, 2024, reduce access and availability of marijuana and synthetic marijuana in LaPorte County as measured by a 10% annual increase in the amount of grams of marijuana and synthetic seized by the LaPorte County law enforcement in comparison to 2022 law enforcement data.</p>	<p>1. Support alternative judicial and treatment pathways for offenders, such as problem-solving courts and juvenile diversionary options that address alcohol/ use abuse.</p> <p>2. Support law enforcement training efforts in dealing with the issue of marijuana/synthetic intoxicated driving, such training and equipment.</p>

V. Fund Document

The fund document allows the LCC to provide finances available to the coalition at the beginning of the year. The fund document gauges an LCC's fiscal wellness to empower their implementation of growth within their community. The fund document also ensures LCCs meet the statutory requirement of funding programs within the three categories of (1) Prevention/Education, (2) Treatment/Intervention, and (3) Criminal Justice Services and Activities (IC 5-2-11-5).

Funding Profile		
1	Amount deposited into the County DFC Fund from fees collected last year:	\$59,737.70
2	Amount of unused funds from last year that will roll over into this year:	\$0.00
3	Total funds available for programs and administrative costs for this year (Line 1 + Line 2):	\$59,737.70
4	Amount of funds granted last year: 48,863.68 carried May-Dec 2021 plus \$13,556.03 Jan- March 2022.	\$62,419.68
Additional Funding Sources (if no money is received, please enter \$0.00)		
A	Substance Abuse and Mental Health Services Administration (SAMHSA):	\$0.00
B	Centers for Disease Control and Prevention (CDC):	\$0.00
C	Bureau of Justice Administration (BJA):	\$0.00
D	Office of National Drug Control Policy (ONDCP):	\$0.00
E	Indiana State Department of Health (ISDH):	\$0.00
F	Indiana Department of Education (DOE):	\$0.00
G	Indiana Division of Mental Health and Addiction (DMHA):	\$0.00
H	Indiana Family and Social Services Administration (FSSA):	\$0.00
I	Local entities:	\$0.00
J	Other:	\$0.00
Categorical Funding Allocations		
Prevention/Education: \$14,934.43	Intervention/Treatment: \$14,934.43	Justice Services: \$14,934.43
Funding allotted to Administrative costs:		
<i>Itemized list of what is being funded</i>		<i>Amount (\$100.00)</i>
Coordinator compensation		\$ 12,000.00
Laptop replacement		\$ 1000.00
Facility meeting space, including storage, copier etc		\$ 1234.41
Bookkeeper support		\$ 600.00
Office supplies Post box rent		\$ 100.00
		\$14,934.41
Funding Allocations by Goal per Problem Statement:		
Problem Statement #1 Opioids, Heroin, Methamphetamine Illicit drugs	Problem Statement #2- Alcohol	Problem Statement #3- Marijuana
Goal 1: <u>\$9240</u>	Goal 1: \$9750	Goal 1: \$8500
	Goal 2: \$3000	Goal 2: \$5500

Goal 2: \$4563.29

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Goal 3 \$4250

Total \$18,053.29

Total \$12,750

Total \$14,000